

APPENDIX A



STATEMENT OF UNDERSTANDING



U.S. Army Corps of Engineers - Readiness Support Center Deployable Tactical Operations System Team Statement of Understanding

This statement of understanding provides general conditions for persons assigned to the U.S. Army Corps of Engineers Deployable Tactical Operations System (DTOS) Teams for emergency operations. **The criteria of this statement of understanding are not negotiable.** The DTOS team member should fully understand the following:

- Performing DTOS duties may involve working in a stressful environment and under adverse conditions.
- Deployments may occur within six (6) hours of notification by the National DTOS Management Team.
- Deployments may result from a response to any type of catastrophic event such as a natural disaster or terrorist attack, and/or military contingency, and may vary in duration from several days to several weeks, and may require travel on military aircraft.
- Periodic training will be required as scheduled by the U.S. Army Corps of Engineers, Readiness Support Center, National DTOS Management Team, and teams may be called to participate in exercises or other training activities.
- Any supplies and/or equipment issued must be kept in serviceable condition and readily accessible for deployment.
- Individuals will be required to support the DTOS program for a minimum of three years.

1.1. DTOS Team Member Agreement <i>I, the undersigned, agree to be a member of the DTOS Team and have read and understand the conditions stated above and that I will notify my Emergency Management Office of any change in status, duty station, physical/mental condition, address or telephone numbers:</i> DTOS Team: _____ Team Position: _____ Name (type or print): _____ Date Signed: _____ Signature: _____	1.2. Personal Data Job Title: _____ Job Series/Grade: _____ Office Symbol: _____ Office Phone/Fax: _____ Home Phone: _____ Address: _____
1.2.1 Supervisor's Concurrence I understand the conditions by which the above individual and organization may have to endure and concur in his/her participation on the DTOS Team. Name: _____ Title: _____ Grade (or Rank): _____ Date Signed: _____ Signature: _____ Division Chief: _____	1.2.2 Commander's Approval I understand the conditions that the above individual and organization may have to endure and approve his/her participation on the DTOS Team. Signature: _____ Date Signed: _____